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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *NONE* <sup>h</sup>

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE* <sup>h</sup>

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials	STATE OR COUNTRY IL	SHEETS DRAWING 3	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
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TITLE  
 Silicon microphone

FILING FEE  RECEIVED 974	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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